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## REISSUE PATENT APPLICATION TRANSMITTAL

Attorney Docket No. 000449.00021 First Named Inventor Noboru Shibata Address to: Original Patent Number 6.288.935 **Assistant Commissioner for Patents Box Patent Application** Original Patent Issue Date September 11, 2001 Washington, DC 20231 (Month/Day/Year) Express Mail Label No. **APPLICATION FOR REISSUE OF:** Utility Patent Design Patent Plant Patent (check applicable box) **APPLICATION ELEMENTS (37 CFR 1.173) ACCOMPANYING APPLICATION PARTS** Statement of status/support for all changes to the claims. 1. Fee Transmittal Form (e.g., PTO/SB/56) See 37 CFR 1.173(c). (Submit an original, and a duplicate for fee processing) 11. Original U.S. Patent for surrender Applicant claims small entity status. See 37 CFR 1.27. Ribboned Original Patent Grant з. 🔀 Specification and Claims in a double column copy of patent format (amended, if appropriate) Statement of Loss (PTO/SB/55) 4. Drawing(s) (proposed amendments, if appropriate) 12. Foreign Priority Claim (35 U.S.C. 119) Reissue Oath / Declaration (original or copy) (if applicable) (37 C.F.R. § 1.175)(PTO/SB/51 or 52) 13. \_\_\_ Information Disclosure Copies of IDS 6. Power of Attorney Statement (IDS)/PTO-1449 Citations 7. Original U.S. Patent currently assigned? Yes No English Translation of Reissue Oath/Declaration ( if applicable) (If Yes, check applicable box(es)) 15. Preliminary Amendment Written Consent of all Assignees (PTO/SB/53) 16. Return Receipt Postcard (MPEP 503) 37 C.F.R. § 3.73(b) Statement (Should be specifically itemized) (PTO/SB/96) 17. Other: Unexecuted Declaration for Broadening CD-ROM or CD-R in duplicate, Computer Program <u>Reissue</u> (Appendix) or large table 9. Nucleotide and/or Amino Sequence Submission (if applicable, all of the following are necessary) a. Computer Readable Form (CFR) b. Specification Sequnece Listing on: i CD-ROM (2 copies) or CD-R (2 copies); or ii 🛘 paper c. Statements verifying identity of above copies 14. CORRESPONDENCE ADDRESS 22907 Customer Number or Bar Code Label Correspondence address below (Insert Customer No. or Attach bar code label here)

City State Zip Code Country Telephone NAME (Print/Type) Registration No. (Attorney/Agent) 38,800 Christopher B Glembocki Sept. 10, 2003 Signature

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